FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(See instructions)			Office use only
NAME OF COMMITTEE (in fi	(Check if n is changed		ing, type 12FE4M	
Congressman Bart Gordon Committee				
ADDRESS (number and si	P.O. Box 2008	; 		
(Check if addre is changed)	ss Murfreesboro		TN	37133 _
00144177550 5 1444	455550	CITY▲	STATE▲	ZIP CODE 📥
COMMITTEE'S E-MAIL teambart@bells				
COMMITTEE'S WEB F	PAGE ADDRESS (URL)			
COMMITTEE'S FAX NI 6158481995 2. DATE M M M 0 1	UMBER / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICATION NUMBER C C00196915				
4. IS THIS STATEMENT NEW (N) OR X AMENDED (A)				
I certify that I have examin	ned this Statement and to the best o	of my knowledge and belief it is t	true, correct and complete	
Type or Print Name of Treasurer Richard F. LaRoche, Jr.				
Signature of Treasurer Electronically Filed by Richard F. LaRoche, Jr. Date Date Date Date Date Date Date Date				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS				
Office Use Only FE3AN042.PDF		Federal Ele	information contact: ction Commission 10-424-9530 994-1100	FEC FORM 1 (Revised 12/2007)